



# HIDALGO COUNTY

## Personnel Adjustment Request Form

DEPARTMENT NAME/NUMBER: **WIC - 350**

DATE: **9-22-11**

CURRENT POSITION TITLE: **Administrative Assistant II**

CURRENT SLOT #: **072**

REQUESTED POSITION TITLE:  
(For new positions or reclassifications)

**REQUEST FOR:**

- New Position     
  Temporary Position     
  Position Reclassification\*     
  Other delete

\*Civil Service Positions are submitted to the Civil Service Commission.

POSITION SALARY REQUEST: **(grade 6/step 6)**

Salary Amount: \$ 32,051.00     
 Proposed Budgeted Salary: \$ 0.00     
 Net Change: \$ 32,051.00  
Current Budgeted Salary      Proposed Budgeted Salary      Net Change

Position to be funded from one of the following:

- Current Department Budget     
  Annual Budget Cycle     
  Will Require Additional Funds  
 Other \_\_\_\_\_

**POSITION Type:**

- Full Time Employee Object 113      
 Part Time Employee Object 114  \_\_\_\_\_  
Enter hourly rate for temp. positions  
 Full Time Temporary Object 121      
 Part Time Temporary Object 122  \$ \_\_\_\_\_  
Hourly Rate \* 2,080 hrs. per year = Annual Salary

**TEMPORARY POSITIONS:**

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)												
<table style="width: 100%;"> <tr> <td style="width: 30%;">CIVIL SERVICE:</td> <td style="width: 30%;">FLSA:</td> <td style="width: 40%;"></td> </tr> <tr> <td>Exempt <input type="checkbox"/></td> <td>Exempt <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Non-Exempt <input checked="" type="checkbox"/></td> <td>Non-Exempt <input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>N/A <input type="checkbox"/></td> <td></td> <td></td> </tr> </table>					CIVIL SERVICE:	FLSA:		Exempt <input type="checkbox"/>	Exempt <input type="checkbox"/>		Non-Exempt <input checked="" type="checkbox"/>	Non-Exempt <input checked="" type="checkbox"/>		N/A <input type="checkbox"/>		
CIVIL SERVICE:	FLSA:															
Exempt <input type="checkbox"/>	Exempt <input type="checkbox"/>															
Non-Exempt <input checked="" type="checkbox"/>	Non-Exempt <input checked="" type="checkbox"/>															
N/A <input type="checkbox"/>																



**JUSTIFICATION/PRIORITY:** (Explain why this position or adjustment request is essential)

Position not needed.

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**NEW POSITION:** Brief job description and attach a copy of the new job description.

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**POSITION RECLASSIFICATION:** Explain change and /or increase in duties and responsibility. (Attach new job description)

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**ADDITIONAL DUTIES:** Explain reason for additional duties and attach list of additional duties.

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**COMMENTS:** (Any comments you wish to make regarding this request)

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**HUMAN RESOURCES:** Classification and Salary Recommendation

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**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

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1.	<u>Armando S. Langoria</u>	<u>09/22/11</u>	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2.	<u>Ethel A. Costello Sylvia Nite</u>	<u>09-23-11</u>	PERSONNEL PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
3.	<u>[Signature]</u>	<u>09/23/2011</u>	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
4.	COMMISSIONERS COURT APPROVAL	DATE			



# HIDALGO COUNTY

## Personnel Adjustment Request Form

DEPARTMENT NAME/NUMBER: **WIC - 350**

DATE: **9-22-11**

CURRENT POSITION TITLE: **Mobile Clinic Coordinatooor**

CURRENT SLOT #: **230**

REQUESTED POSITION TITLE:  
(For new positions or reclassifications)

**REQUEST FOR:**

- New Position    
  Temporary Position    
  Position Reclassification\*    
  Other delete

\*Civil Service Positions are submitted to the Civil Service Commission.

POSITION SALARY (grade: **6/step 2**)

Salary Amount: \$ 28,231.00     \$ 0.00     \$ (28,231.00)

Current Budgeted Salary
Proposed Budgeted Salary
Net Change

Position to be funded from one of the following:

- Current Department Budget    
  Annual Budget Cycle    
  Will Require Additional Funds  
 Other \_\_\_\_\_

**POSITION Type:**

Full Time Employee Object 113     
 Part Time Employee Object 114  \_\_\_\_\_  
 Full Time Temporary Object 121     
 Part Time Temporary Object 122  \$ \_\_\_\_\_  
Enter hourly rate for temp. positions  
Hourly Rate \* 2,080 hrs. per year = Annual Salary

**TEMPORARY POSITIONS:**

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)
CIVIL SERVICE:				
Exempt	<input type="checkbox"/>	FLSA: Exempt	<input type="checkbox"/>	
Non-Exempt	<input checked="" type="checkbox"/>	Non-Exempt	<input checked="" type="checkbox"/>	
N/A	<input type="checkbox"/>			

**JUSTIFICATION/PRIORITY:** (Explain why this position or adjustment request is essential)  
**Position not needed**

**NEW POSITION:** Brief job description and attach a copy of the new job description.

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**POSITION RECLASSIFICATION:** Explain change and /or increase in duties and responsibility. (Attach new job description)

**ADDITIONAL DUTIES:** Explain reason for additional duties and attach list of additional duties.

**COMMENTS:** (Any comments you wish to make regarding this request)

**HUMAN RESOURCES:** Classification and Salary Recommendation

**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

1.	<u>Aracelis S. Longoria</u> DEPARTMENT HEAD	<u>9/22/11</u> DATE	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2.	<u>Esther A. Cruzley Defuriales</u> HUMAN RESOURCES DIRECTOR	<u>09.23.11</u> DATE	PERSONNEL PROCEDURES COMPLETED	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3.	<u>[Signature]</u> DEPARTMENT OF BUDGET & MANAGEMENT	<u>09/23/2011</u> DATE	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
4.	COMMISSIONERS COURT APPROVAL	DATE			



# HIDALGO COUNTY

## Personnel Adjustment Request Form

**DEPARTMENT NAME/NUMBER:**  
WIC Department 350  
**CURRENT POSITION TITLE:**

**DATE:** 9/27/2011  
**CURRENT SLOT. #:** 241

**REQUESTED POSITION TITLE:** (For new positions or reclassifications) **WIC Certification Specialist I - Grade 5 Step 1**

**REQUEST FOR:**

New Position     Temporary Position     Position Reclassification\*     Other \_\_\_\_\_

\*Civil Service Positions are submitted to the Civil Service Commission.

**POSITION SALARY REQUEST:** (grade 5/ Step 1)  
 Salary Amount: \$ 0.00 Current Budgeted Salary    \$ 25,256.00 Proposed Budgeted Salary    \$ 25,256.00 Net Change

Position to be funded from one of the following:

Current Department Budget     Annual Budget Cycle     Will Require Additional Funds  
 Other \_\_\_\_\_

**POSITION Type:**

Full Time Employee Object 113     Part Time Employee Object 114  \_\_\_\_\_  
 Full Time Temporary Object 121     Part Time Temporary Object 122  \$ \_\_\_\_\_  
Enter hourly rate for temp. positions  
Hourly Rate \* 2,080 hrs. per year = Annual Salary

**TEMPORARY POSITIONS:**

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)
<b>CIVIL SERVICE:</b> Exempt <input type="checkbox"/> FLSA: Exempt <input type="checkbox"/> Non-Exempt <input checked="" type="checkbox"/> Non-Exempt <input checked="" type="checkbox"/> N/A <input type="checkbox"/>				

**JUSTIFICATION/PRIORITY:** (Explain why this position or adjustment request is essential)

Increase in clinic caseload necessitates an additional Certification  
position.

**NEW POSITION:** Brief job description and attach a copy of the new job description.

sdfsdf See Attached

**POSITION RECLASSIFICATION:** Explain change and /or increase in duties and responsibility. (Attach new job description)

**ADDITIONAL DUTIES:** Explain reason for additional duties and attach list of additional duties.

**COMMENTS:** (Any comments you wish to make regarding this request)

**HUMAN RESOURCES:** Classification and Salary Recommendation

**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

1.	<u>Thomas G. Laguarda</u>	<u>9/22/11</u>	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	DEPARTMENT HEAD	DATE			
2.	<u>Esther A. Cortez de la Cruz</u>	<u>09-23-11</u>	PERSONNEL PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	HUMAN RESOURCES DIRECTOR	DATE			
3.	<u>[Signature]</u>	<u>09/23/2011</u>	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	DEPARTMENT OF BUDGET & MANAGEMENT	DATE			
4.	COMMISSIONERS COURT APPROVAL	DATE			



# HIDALGO COUNTY

## Personnel Adjustment Request Form

DEPARTMENT NAME/NUMBER: **WIC - 350**

DATE: **9/20/11**

CURRENT POSITION TITLE:

CURRENT SLOT #: **242**

REQUESTED POSITION TITLE:  
(For new positions or reclassifications) **Nutritionist II Grade 13 Step 1**

**REQUEST FOR:**

New Position     Temporary Position     Position Reclassification\*     Other \_\_\_\_\_

\*Civil Service Positions are submitted to the Civil Service Commission.

POSITION SALARY REQUEST: (grade 13/step 1)

Salary Amount: \$ 0.00    Current Budgeted Salary    \$ 46,747.00    Proposed Budgeted Salary    \$ 46,747.00    Net Change

Position to be funded from one of the following:

Current Department Budget     Annual Budget Cycle     Will Require Additional Funds

Other \_\_\_\_\_

**POSITION Type:**

Full Time Employee Object 113     Part Time Employee Object 114  \_\_\_\_\_  
Enter hourly rate for temp. positions

Full Time Temporary Object 121     Part Time Temporary Object 122  \$ \_\_\_\_\_  
Hourly Rate \* 2,080 hrs. per year = Annual Salary

**TEMPORARY POSITIONS:**

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)

CIVIL SERVICE:

Exempt <input checked="" type="checkbox"/>	FLSA: Exempt <input checked="" type="checkbox"/>
Non-Exempt <input checked="" type="checkbox"/>	Non-Exempt <input type="checkbox"/>
N/A <input type="checkbox"/>	

**JUSTIFICATION/PRIORITY:** (Explain why this position or adjustment request is essential)

**Career Ladder needed for Nutritionist I**

*\* Per Norma Longoria 09-23-11 HR*

**NEW POSITION:** Brief job description and attach a copy of the new job description.

**See attached.**

**POSITION RECLASSIFICATION:** Explain change and /or increase in duties and responsibility. (Attach new job description)

**COMMENTS:** (Any comments you wish to make regarding this request)

**HUMAN RESOURCES:** Classification and Salary Recommendation

**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

- |    |  |                                  |                                   |   |
|----|--|----------------------------------|-----------------------------------|---|
| 1. | <u><i>N. Lopez</i></u><br>DEPARTMENT HEAD                                | <u><i>9/20/11</i></u><br>DATE    | FUNDING AVAILABLE IN DEPT. BUDGET | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| 2. | <u><i>Esther A. Cortez by Selma Nino</i></u><br>HUMAN RESOURCES DIRECTOR | <u><i>09.23.11</i></u><br>DATE   | PERSONNEL PROCEDURES COMPLETED    | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| 3. | <u><i>[Signature]</i></u><br>DEPARTMENT OF BUDGET & MANAGEMENT           | <u><i>09/23/2011</i></u><br>DATE | BUDGET PROCEDURES COMPLETED       | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| 4. | COMMISSIONERS COURT APPROVAL   | DATE                             |                                   |   |



# HIDALGO COUNTY

## Personnel Adjustment Request Form

DEPARTMENT NAME/NUMBER: **WIC - 350**

DATE: **9-22-11**

CURRENT POSITION TITLE: **Peer Counselor I**

CURRENT SLOT. #: **002-002**  
**002-006**

REQUESTED POSITION TITLE:  
(For new positions or reclassifications)

**REQUEST FOR:**

- New Position     
  Temporary Position     
  Position Reclassification\*     
  Other delete

\*Civil Service Positions are submitted to the Civil Service Commission.

**POSITION SALARY REQUEST:**  
(grade 2/step 1)

Salary Amount: \$ 20,049.00 × 2      \$ 0.00      \$ (40,098.00)  
Current Budgeted Salary      Proposed Budgeted Salary      Net Change

Position to be funded from one of the following:

- Current Department Budget     
  Annual Budget Cycle     
  Will Require Additional Funds  
 Other \_\_\_\_\_

**POSITION Type:**

Full Time Employee Object 113      
 Part Time Employee Object 114  \_\_\_\_\_  
Enter hourly rate for temp. positions  
 Full Time Temporary Object 121      
 Part Time Temporary Object 122  \$ \_\_\_\_\_  
Hourly Rate \* 2,080 hrs. per year = Annual Salary

**TEMPORARY POSITIONS:**

Start Date	End Date	Working Days & Hours	Hours Per Week	Duration (2 weeks, 3 months, etc.)
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CIVIL SERVICE:	FLSA:	
Exempt <input type="checkbox"/>	Exempt <input type="checkbox"/>	
Non-Exempt <input checked="" type="checkbox"/>	Non-Exempt <input checked="" type="checkbox"/>	
N/A <input type="checkbox"/>		

**JUSTIFICATION/PRIORITY:** (Explain why this position or adjustment request is essential)

position not needed

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**NEW POSITION:** Brief job description and attach a copy of the new job description.

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**POSITION RECLASSIFICATION:** Explain change and /or increase in duties and responsibility. (Attach new job description)

**ADDITIONAL DUTIES:** Explain reason for additional duties and attach list of additional duties.

**COMMENTS:** (Any comments you wish to make regarding this request)

**HUMAN RESOURCES:** Classification and Salary Recommendation

**BUDGET & MANAGEMENT:** Classification and Salary Recommendation

1.	<u><i>Thomas S. Lopez</i></u> DEPARTMENT HEAD	<u>9/22/11</u> DATE	FUNDING AVAILABLE IN DEPT. BUDGET	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
2.	<u><i>Ethel A. Lopez by Sylvia Rio</i></u> HUMAN RESOURCES DIRECTOR	<u>09-23-11</u> DATE	PERSONNEL PROCEDURES COMPLETED	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.	<u><i>[Signature]</i></u> DEPARTMENT OF BUDGET & MANAGEMENT	<u>09/23/2-11</u> DATE	BUDGET PROCEDURES COMPLETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
4.	COMMISSIONERS COURT APPROVAL	DATE		